

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective December 8, 2004

10/723 968

**CLAIMS AS FILED - PART I**

(Column 1) (Column 2)

|   |              |              |
|---|--------------|--------------|
| TOTAL CLAIMS  |              |              |
| FOR   | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | minus 20 =   |              |
| INDEPENDENT CLAIMS  | minus 3 =    |              |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |              |              |

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY  
TYPE ☐

OR OTHER THAN  
SMALL ENTITY

|           |        |    |           |        |
|-----------|--------|----|-----------|--------|
| RATE      | FEE    |    | RATE      | FEE    |
| BASIC FEE | 150.00 | OR | BASIC FEE | 300.00 |
| X\$ 25=   |        | OR | X\$50=    |        |
| X100=     |        | OR | X200=     |        |
| +180=     |        | OR | +360=     |        |
| TOTAL     |        | OR | TOTAL     |        |

**CLAIMS AS AMENDED - PART II**

(Column 1) (Column 2) (Column 3)

2/3/05

|             |   |   |       |   |                  |
|-------------|---|---|-------|---|------------------|
| AMENDMENT A |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|             | Total   | * 20                                      | Minus | ** 20                                       | = 0              |
|             | Independent   | * 3                                       | Minus | *** 3                                       | = 0              |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |   |       |   |                  |

SMALL ENTITY OR OTHER THAN  
SMALL ENTITY

|                     |                        |    |                     |                        |
|---------------------|------------------------|----|---------------------|------------------------|
| RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
| X\$ 25=             | 0                      | OR | X\$50=              |                        |
| X100=               | 0                      | OR | X200=               |                        |
| +180=               |                        | OR | +360=               |                        |
| TOTAL<br>ADDIT. FEE | 0                      | OR | TOTAL<br>ADDIT. FEE |                        |

(Column 1) (Column 2) (Column 3)

|             |   |   |       |   |                  |
|-------------|---|---|-------|---|------------------|
| AMENDMENT B |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|             | Total   | *   | Minus | **  | =                |
|             | Independent   | *   | Minus | ***   | =                |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |   |       |   |                  |

|                     |                        |    |                     |                        |
|---------------------|------------------------|----|---------------------|------------------------|
| RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
| X\$ 25=             |                        | OR | X\$50=              |                        |
| X100=               |                        | OR | X200=               |                        |
| +180=               |                        | OR | +360=               |                        |
| TOTAL<br>ADDIT. FEE |                        | OR | TOTAL<br>ADDIT. FEE |                        |

(Column 1) (Column 2) (Column 3)

|             |   |   |       |   |                  |
|-------------|---|---|-------|---|------------------|
| AMENDMENT C |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|             | Total   | *   | Minus | **  | =                |
|             | Independent   | *   | Minus | ***   | =                |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |   |       |   |                  |

|         |                        |    |        |                        |
|---------|------------------------|----|--------|------------------------|
| RATE    | ADDI-<br>TIONAL<br>FEE |    | RATE   | ADDI-<br>TIONAL<br>FEE |
| X\$ 25= |                        | OR | X\$50= |                        |
| X100=   |                        | OR | X200=  |                        |
| +180=   |                        | OR | +360=  |                        |